

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)		THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE		PAGE OF 01	PAGES 11
1. REQUEST NO. N00173-12-Q-0166	2. DATE ISSUED 05/08/2012	3. REQUISITION/PURCHASE REQUEST NO. 63-8815-12	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING	
5a. ISSUED BY Supply Officer (Code 3410) NRL Washington DC 20375-5329			6. DELIVER BY (Date) 06/18/2012		
5b. FOR INFORMATION CALL (NO COLLECT CALLS)			7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)		
NAME Cynthia V. Offutt		TELEPHONE NUMBER AREA CODE 202 NUMBER 767-3452		9. DESTINATION a. NAME OF CONSIGNEE Naval Research Laboratory	
a. NAME All Quoters		b. COMPANY		b. STREET ADDRESS 4555 Overlook Avenue SW	
c. STREET ADDRESS				c. CITY Washington	
d. CITY		e. STATE	f. ZIP CODE	d. STATE DC	e. ZIP CODE 20375-5329
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 05/18/2012		IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.			

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/ SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See attached continuation sheets				

12. DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS	
				NUMBER	PERCENTAGE

NOTE: Additional provisions and representations ☐ are ☐ are not attached.

13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION	
a. NAME OF QUOTER			16. SIGNER			
b. STREET ADDRESS						
c. COUNTY						
d. CITY			e. STATE	f. ZIP CODE	c. TITLE (Type or print)	
					b. TELEPHONE	
					AREA CODE	
					NUMBER	

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1-16.101		CONTINUATION SHEET		REF. NO. OF DOC. BEING CONT'D N00173-12-Q-0166		PAGE OF 2 11	
NAME OF OFFEROR CONTRACTOR							
All Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
001	Part # PL-HE-2GB PureLab HE 2 Gove Box with Gas Purification-Includes Modular End Panel Design Glove box module-Type 304 stainless steel construction Internal dimensions inches-48W x 35 H x 31 D Internal dimensions metric (mm)- 1250 W x 900 H x 780 D Gas purification System- re-circulating <1ppm O2 & H2O equilibrium Absorption capacity-30 liters O2 and 1300 gram H2O Purification columns include fill & empty ports for easy catalyst replacement Nitrogen, Argon or Helium operable Automatic column isolation valves All stainless steel gas flow piping & fittings 0-60 CFM variable speed blower-vibration dampened, none heat load forming Programmable logic controller (PLC) Six (6) inch color touch screen interface mounted on swing arm Automatic regeneration, automatic pressure control Foot pedals for pressure adjustment, password protected HMI Manual purge valve Antechamber (15" Diameter x 24" Long) with spindle door mechanism; gas piston Assist and stainless steel sliding tray RV-8 rotary vane mechanical vacuum pump (7CFM) Upgrade to dry scroll pumps Three (3) full length, height adjustable storage shelves mounted on rear wall Electrical feed through with six (6) outlet power strip per glove box module Stand with locking and leveling casters External fluorescent light assembly Extra 3/8 inch swagelck bulk head fitting (Blanked) Extra KF-40 (40mm) flange feed through (Blanked) 0.3 micron HEPA inlet/ outlet fiters Delrin glove ports, MR-10 chemical resistant Lexan window 8B1532-9 Butyl gloves Note: Gloves to be ambidextrous	1	ea				

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NAME OF OFFEROR CONTRACTOR All Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
002	Part # SYS1-O2-OB Oxygen analyzer-designed to measure trace amounts of oxygen within an inert atmosphere. Measures between 0-1000 ppm	1	ea				
003	Part # SYS1-H2O-OB Moisture analyzer-designed to measure absolute content of moisture within an inert atmosphere. Measures between 0-1000 ppm	1	ea				
004	Part # SYS1-XDS10-UG Upgrade to a Edwards XDS-10 dry scroll vacuum pump	1	ea				
005	Part # SYS1-KF50 KF-50 flange with clamp. Centering ring & blank Note: Location-1 on top ox box, 3 on end panel opposite A/C Brand Name or Equal If available please include a published price list or a cost breakdown and return the RFQ package to the following fax number 202-767-3875/6675. Any questions concerning this Request for Quotation (RFQ) must be emailed to SolQnA@nrl.navy.mil at least five (5) days before the closing date shown in block 10 on page 1 of this RFQ.	4	ea				